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## BIB DATA SHEET

CONFIRMATION NO. 1454

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.		
10/540,109	06/20/2005 RULE	293	3611	P70670US0		
<b>APPLICANTS</b> Arne Carlsson, Valberg, SWEDEN; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/SE03/02036 12/19/2003 <b>** FOREIGN APPLICATIONS *****</b> SWEDEN 0203813-1 12/20/2002 <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 04/24/2006						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/DANIEL S YEAGLEY/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance D.Y. <u>Initials</u>	<b>STATE OR COUNTRY</b> SWEDEN	<b>SHEETS DRAWINGS</b> 3	<b>TOTAL CLAIMS</b> 14	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> JACOBSON HOLMAN PLLC 400 SEVENTH STREET N.W. SUITE 600 WASHINGTON, DC 20004 UNITED STATES						
<b>TITLE</b> Impact attenuating device for vehicle						
<b>FILING FEE RECEIVED</b> 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		